## **2008 LIMITED LIABILITY COMPANY**

DO NOT WRITE IN THIS SPACE

## **ANNUAL REPORT**

**DOCUMENT # L02000012106** 

1. Entity Name

MANATEE ROOFING, LLC



**FILED** May 06, 2008 08:00 AN Secretary of State

Principal Place of Business

1811 76TH ST NW BRADENTON, FL 34209 Mailing Address

1811 76TH ST NW BRADENTON, FL 34209



05012008 No Chg-LLC

CR2E083 (12/07)

| L. | FEI Nu | mber |     |   |  |
|----|--------|------|-----|---|--|
|    | 01-0   | 7179 | 938 | , |  |
|    |        |      |     |   |  |

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, RANDY L 18117 6TH ST NW BRADENTON, FL 34209

## DO NOT WRITE IN THIS SPACE

| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| SIGNATURE   |  |  |  |  |  |  |  |
| SIGNATORIE  | Signature, typed or printed name of registered agent and title if applicable | (NOTE, Registered Agent signature required when reinstating) | DATE                                       |  |  |  |  |
|   | NOW!!! FEE IS \$138.75<br>/ 1, 2008 Fee will be \$538.75                     |  |  |  |  |  |  |
| 9.  | MANAGING MEMBERS/MANAGERS  |  |  |  |  |  |  |
| TITLE   | Р  |  |  |  |  |  |  |
| NAME  | COOK, RANDY  |  |  |  |  |  |  |
| STREET ADDRESS  | 1811 75TH STREET NW  |  |  |  |  |  |  |
| CITY-ST-ZIP   | BRADENTON, FL 34209  |  |  |  |  |  |  |
| Im c  |  |  |  |  |  |  |  |
| TITLE<br>NAME   |  |  | 1100000040000                              |  |  |  |  |
| STREET ADDRESS  |  |  | U00000948797<br>.06/03/03-80002-004 138.75 |  |  |  |  |
| •   |  | •  | .95/03/03-80002-004 138.75                 |  |  |  |  |
| CITY-ST-ZIP   |  |  | •  |  |  |  |  |
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| NAME  |  | i in   | I TIO SPACE                                |  |  |  |  |
| STREET ADDRESS  |  | H .  |  |  |  |  |  |
| CHY-ST-ZIP  |  | 1  |  |  |  |  |  |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE